## Overview of DQRS, FARS and BPDRs



CAPT Juliaette Johnson, R.N., M.S. Division of Compliance Risk Management & Surveillance

#### **Mission**

- Assuring that safe and effective drugs are available to the public
- Reduce public health risks associated with the quality, safety, and effectiveness of the nation's marketed drugs
- High-quality pharmacovigilance and risk minimization practices
- Utilize strategic problem solving to identify, evaluate, and prioritize risks related to drug quality, safety, effectiveness, and availability.

#### Performance Goals/Objectives

Input **Program Processes:** Efficacy of triage and reporting Data capture •Efficient information management

Output

Consistency with coding processes
Close loop with completed actions & results
Evaluation and revision of SOPs to reflect best practices
Data trending

Outcome **Improved Public** Health

### NDA Field Alert Reports (FARs)

• CFR 314.81 (b)(i) and (ii)

NDAs and ANDAs

• Effective May 23, 1985

## 21 CFR 314.81 (1)(i) Required Reporting

Any incident that causes the drug product or its labeling to be mistaken for, or applied to, another article

(adulterated or misbranded)

## 21 CFR 314.81 (1)(ii) Required Reporting

- Bacterial contamination
- Significant chemical, physical or other change
- Product deterioration
- Out-of-specification

### Reporting Requirements

- Applicant holders are required to submit NDA/ANDA Field Alert reports on drug products manufactured or distributed within or outside the U.S.
- U.S. Office/Agent (21 CFR 314.50(a)(5))-responsible for reporting to FDA district office where registered/located
- Notify the district office within 3 working days

### Reporting Requirements

- Information may be provided by telephone or other rapid communication means, with prompt written follow-up
- Form FDA 3331or equivalent/variation
- Internet Availability of Form 3331 Word Format http://www.fda.gov/opacom/morechoices/fdaforms/cder.html

or

http://forms.psc.gov/forms/MSWFDA/FDA-3331.doc

## Changes to Field Alert Form (#3331)

DEPARTMENT OF HEALTH AND HUMAN SERVICES FOOD AND DRUG ADMINISTRATION NDA-FIELD ALERT REPORT			IAME AND A	ADDRESS	OF DISTRICT)		
TYPE OF REPORT	☐ Initial	☐ Follo	w-Up		☐ Final		
In accordance with Section 18.81(b)(1)(i) and (ii) of the New Drug and Antibiotic Regulations (21 CFR 314) promulgated under the Federal Food, Drug and Cosmetic Act, as amended, the following information is herewith submitted:							
NDA/ANDA - ANTIBIOTIC FORM 5/6 NO.				NDC	No.		
GENERIC NAME OF DRUG F	NERIC NAME OF DRUG PRODUCT  TRADE NAME (if any) OF DRUG PRODUCT						
FIRM NAME AND ADDRESS WHERE PROBLEM OCCURRED					FEI		
DOSAGE FORM, STRENGTH	I, AND PACKAGE SIZE(S)						

## 3 Working Days Required to Report

- Starts
  - Firm becomes <u>aware</u> of a <u>reportable</u>
     <u>problem</u>
    - Complaint
    - Internal testing
    - Unconfirmed problem
    - Confirmed problem

## Firm Reporting

- FAR Required
  - Further investigation required
  - Corrective action initiated
    - e.g., Formulation revision, labeling change
  - Product Recall

- FAR Not Required
  - Problem is resolved within 3 working days
    - e.g., Analytical lab error

## District Responsibilities

- Submit a copy of each FAR
  - Initial
    - within 5 working days
  - Follow-up
  - Final
    - Upon receipt and district evaluation

#### District Responsibilities (cont'd)

- Submit district action plan
  - Available investigational information
- Assess significance of FAR
  - Conduct appropriate follow-up
- Determine compliance with regulation
  - Routine inspections
  - Pre-approval inspections

## District Surveillance Program Team Contact

- Designated by District
  - >Normally DQRS coordinator for the District

## Surveillance Program Team Responsibilities

- Liaison between District Offices and CDER
- Receive all FARS
- Forwards FARs to appropriate CDER Offices/Divisions
  - Subsequent review & actions are responsibility of the receiving Offices/Divisions

## CDER Review Divisions Responsibilities

- Review FAR
  - Determine completeness for review
  - Assure any corrective action(s) is not in conflict with NDA/ANDA requirements
- Assures that a supplement has been submitted and approved for the NDA/ANDA
- FAR becomes part of the approved NDA/ANDA

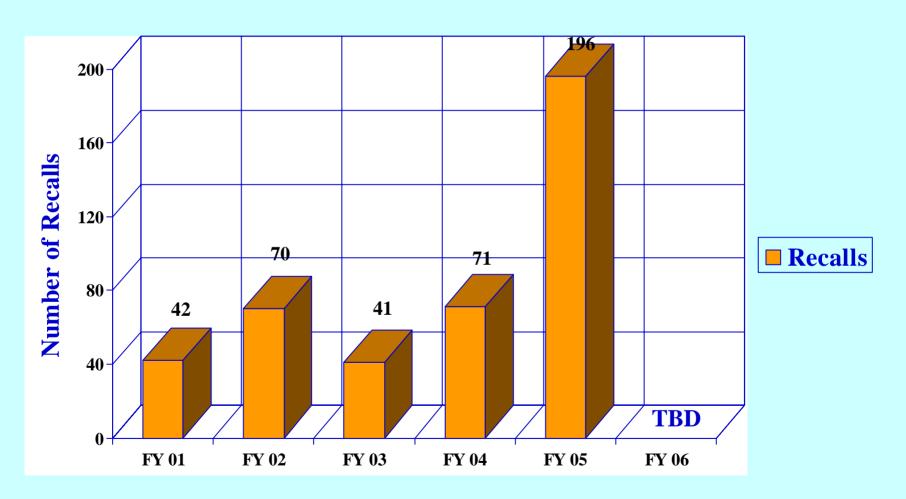
#### HFD-330 Regulatory Actions

- HFD-330 approves regulatory actions regarding FAR reporting
- Warning Letter
  - When appropriate
    - Significance of violation(s)
    - Previously cited violation(s)
    - Concurrence with headquarters

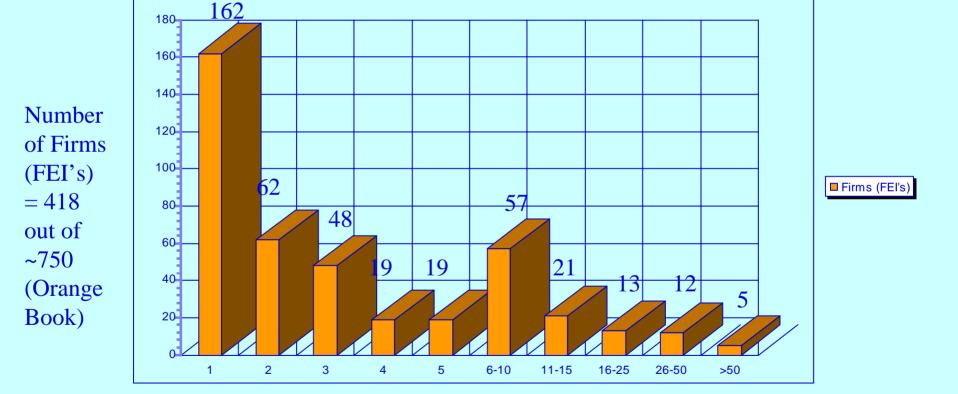
## Number of Applicants Submitting FAR Reports FY 01 - FY 05



## Recalls Resulting from Field Alerts FY 01 - FY 05

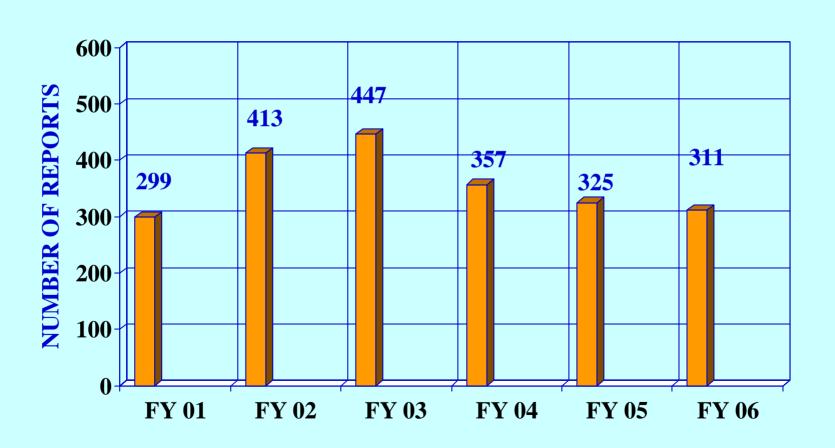


## FARS Reports for 2000 -2006



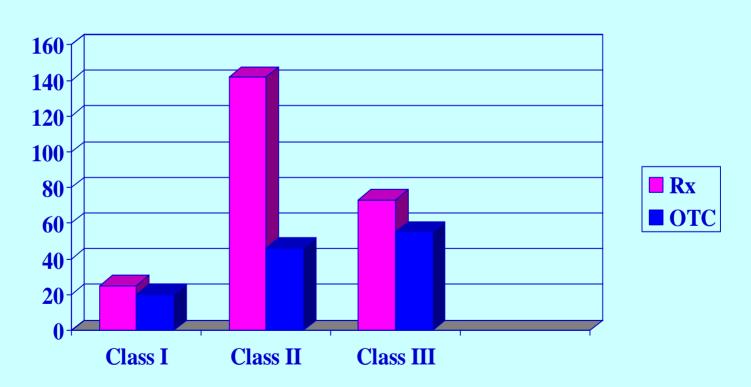
Number of FARS

## Total Field Alerts Received FY 01 - FY 06



## Summary of FY 06 Recalls

Total Recalls - 361 for FY 06



## **Drug Quality**

Reporting System

(DQRS)

#### DQRS Background

• 1971 - 1988 Drug Product Problem

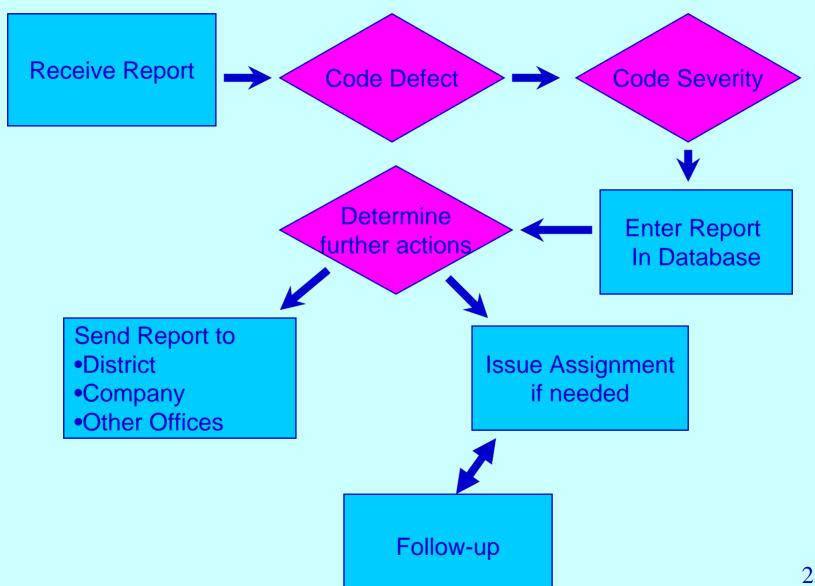
Reporting Program (DPPR)

1988 - 2000 USP Drug Product Problem
 Reporting Program

(USP Program terminated August 31, 2000)

- 1988 1993 Drug Quality Reporting
   System (DQRS)
- 1993 Present MedWatch Program

## Proposed DQRS Workflow Model



### DQRS Program Objectives

- Rapidly identify significant health hazards
- Detect industry problems and trends
- Operate a centralized reporting system

## Surveillance Program Team Responsibilities

- Screen all reports
  - Review/Evaluate
  - Prioritize
  - Potential Health Hazard

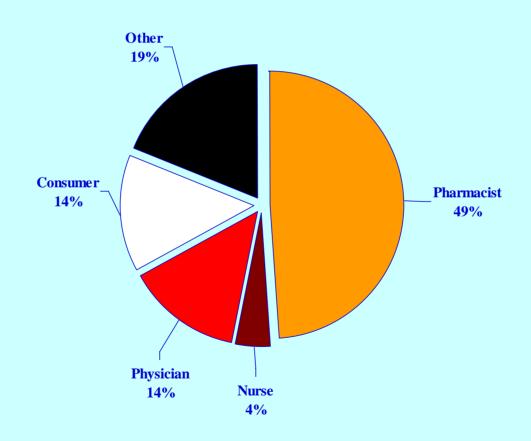
- Collect and Verify Information
  - Contact reporter
  - Contact CDER review division



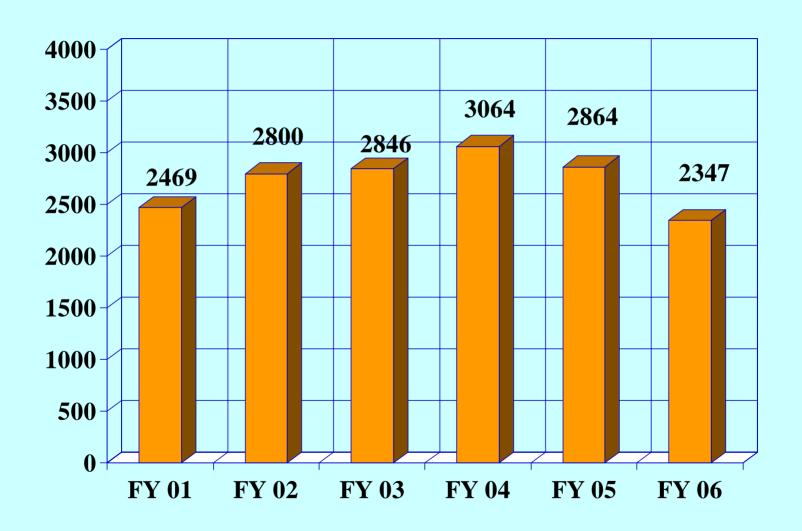
## Classification of Reports

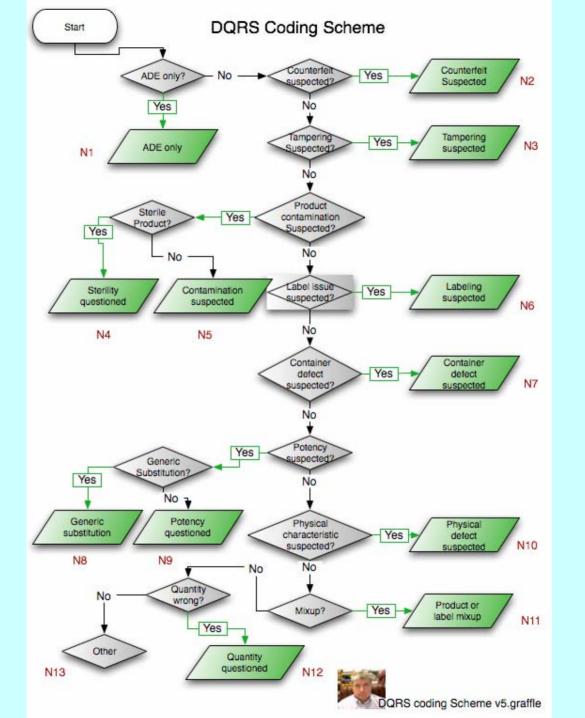
- Priority 1 Imminent or serious health hazard
- Priority 2 Potentially significant cGMP problems
- Priority 3 Routine follow-up

# Source of DQRS Reports FY-05



## Total DQRS Reports Received

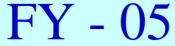


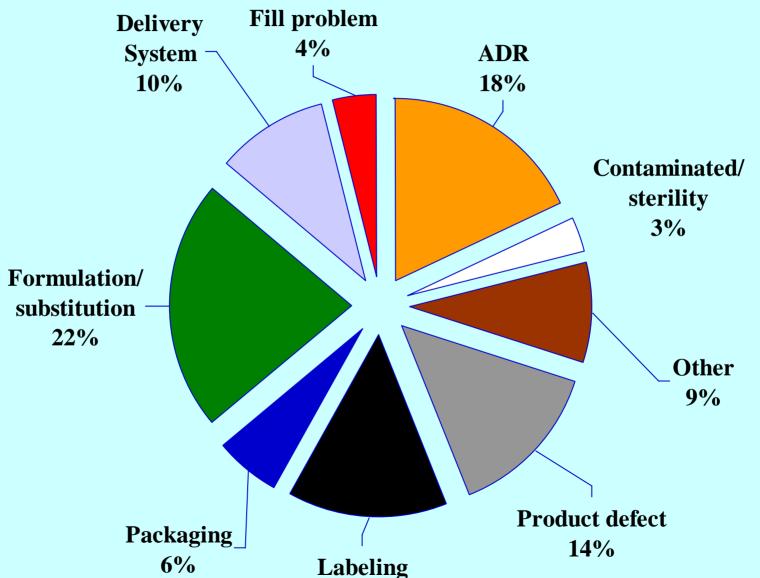


## **Proposed Coding Scheme**

Labeling suspected	N <sub>6</sub>	LEVEL 1		
LEVEL 2			LEVEL 3	
	MISSING			DISPENSING INFO
	WRONG			LOT NUMBER
	QUALITY			BARCODE
	QUANTITY			NDC NUMBER
	CONTENT			MISLEADING
				INGREDIENT
				IMPRINTING

## DQRS Primary Defects Reported

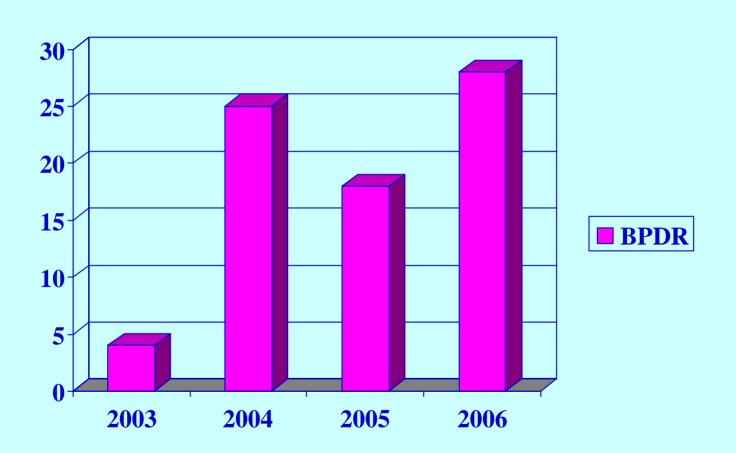




# Biological Product Defect Reports (BPDR)

- October 1, 2003 transfer of certain product oversight from the CBER to CDER.
- June 30, 2003 transfer of some therapeutic biological products from CBER to CDER.
- CBER and CDER regularly consult with each other whenever necessary.

## **BPDR** History



#### **BPDR** Regulations

- Current Good Manufacturing Practice in Manufacturing, Processing, Packaging or Holding of Drugs; General (21 CFR 210)
- Current Good Manufacturing Practice for Finished Pharmaceuticals (21 CFR 211)
- Biological Products: General (21 CFR 600)
   General Biological Products Standards (21 CFR 610)

#### BPDR Regulations (cont'd)

- § 600.14 Reporting of biological product deviations by licensed manufacturers.
- (a) Who must report under this section? (1) You, the manufacturer who holds the biological product license and who had control over the product when the deviation occurred, must report under this section. If you arrange for another person to perform a manufacturing, holding, or distribution step, while the product is in your control, that step is performed under your control. You must establish, maintain, and follow a procedure for receiving information from that person on all deviations, complaints, and adverse events concerning the affected product.

## **BPDR** Triage Referrals

•	BIOLOGICAL PRO	DUCT DEV	IATION RE	PORT REFERR	AL		
•	INITIALF	OLLOW-UP	FIN	IAL	_		
•	DATE:		2006				
•	FROM:	CAPT Juliae	ette Johnson,	RN (klh)			
•		Drug Quality	y Reporting S	System Program	Manager		
•		NDA Field	Alert Progran	n Manager			
•	Surveillance and Da	ta Analysis E	Branch, HFD-	-332			
•	TO:	Dr. Steven k	Kozlowski (N	IIH Campus) (El	ectronic Copy)		
•		Acting Direc	ctor, OPS				
•		Office of Biotechnology Products					
•		(HFD-123 V	Vhite Oak ar	nd NIH Campus)	(Electronic copy)		
•	CC:	LCDR Tia F	Harper-Velaso	quez (Electronic	copy)		
•		Nick Buhay	(Electronic	copy)			
•		Brenda Urat	ani (Electron	ic copy)			
•		Sheila Rawl	s (Electronic	copy)			
•	copy)		PMST(	Coordinator	District Office (Electronic		
•	SUBJECT:						
•	BL Number (DQRS	Tracking):					
•	FIRM		Product:				

Please contact me at 301-827-8928 if you have any question(s) regarding this referral.

38

#### BPDR (cont'd)

• To see which product classes have been transferred and which will remain at CBER, please refer to:

http://www.fda.gov/cder/biologics/default.htm

#### MedWatch Reporting

- Telephone: 800 FDA(332)-1088
- Postage Paid Form (3500)/Mailer
- FAX: 800-FDA(332)-0178
- Internet: <a href="http://www.fda.gov/medwatch/">http://www.fda.gov/medwatch/</a>
- Report can be submitted on-line

#### All forms are online at:

http://www.fda.gov/opacom/morechoices/fdaforms/default.html

#### Program Contact

CAPT Juliaette Johnson, R.N., M.S.

VOICE - 301-827-8928

FAX - 301 827-8903

E-Mail: juliaette.johnson@fda.hhs.gov